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Montpelier, VT 05620-2501  
**Education.Vermont.gov**

**Department of Health**  
108 Cherry Street, PO Box 70  
Burlington, VT 05402-0070  
**HealthVermont.gov**

September 11, 2009

Dear Vermont Educators:

On August 19, we wrote to state educators about the actions schools can take now to help keep the flu – seasonal influenza and the new 2009 H1N1 influenza – from spreading in the school setting. We also mentioned the possibility of using schools as a setting to offer the 2009 H1N1 flu vaccine to students when that vaccine is available. Since then, the Vermont Department of Health has been working closely with multiple partners – including the Department of Education – to plan for public health clinics to administer the 2009 H1N1 flu vaccine. The vaccine is now expected to begin arriving in states as early as mid to late October. The Health Department is enlisting the help of hospitals, health care provider offices, home health agencies and other health care facilities, and schools to ensure that eligible Vermonters have the opportunity to be vaccinated against this new flu. One of the target groups for initial vaccination is children and young adults age 6 months through 24 years.

In an effort to reach as many children as possible, the Health Department will make vaccinations available in schools. However, since it is not possible to offer Health Department-run clinics in every school, several different clinic models are planned. For schools with 300 or more students, clinics with staffing, set-up and logistics managed by the Health Department will be offered. Smaller schools will be offered vaccine, vaccination supplies and technical assistance from the Health Department so that school nurses may administer the vaccine to students. See attachments for more details on all options.

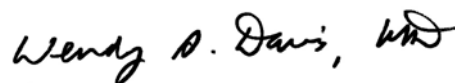
No matter which school vaccination model is used, the Health Department will provide vaccine and vaccination supplies (including syringes, needles, alcohol wipes and sharps containers), at no cost to the school or student. The Health Department will also provide parent information letters, screening forms, consent forms and vaccine information sheets. Please remember and pass along the information that vaccination for this or any flu is voluntary, not mandatory.

**IMPORTANT!** Schools that are interested in receiving the 2009 H1N1 influenza vaccine this fall must **complete the enclosed form and return it to the Vermont Department of Health by September 18.** Once these forms are collected and reviewed, each school that has indicated an interest in receiving vaccine will be contacted. If you have any questions, please call the Vermont Department of Health's Immunization Program at 802-863-7638.

Sincerely,



Armando Vilaseca  
Commissioner of Education



Wendy Davis, MD  
Commissioner of Health



## School Vaccination Models

Two options for providing school-based 2009 H1N1 flu vaccinations are outlined below. Also included is an option to NOT provide school-based vaccinations. Please review the clinic models and, on the attached form, choose which clinic model your school prefers. Decisions regarding the clinic model to be used in your school will not be made until the Vermont Department of Health has assessed responses from schools. The Health Department will contact each school interested in providing vaccinations to assist with clinic planning.

### **Option 1 – Health Department-run vaccination clinic (*for schools with 300 or more students*)**

The Health Department will be responsible for the vaccination clinics in your school. We will:

- Provide all clinic supplies and letters to parents, screening and consent forms (originals).
- Obtain and oversee staff who will vaccinate students enrolled in your school, under the medical orders of the commissioner of health.
- Be responsible for vaccine handling, storage and documentation requirements.

The school will be responsible for assisting the Health Department. The school will:

- Designate a point of contact (most likely the school nurse) to work with the Health Department.
- Make copies of all original letters and forms.
- Send letters and consent forms to parents, and collect and verify returned forms.
- Provide adequate space, chairs, and tables for the clinic.
- Obtain and oversee school volunteers to assist and supervise children during the clinics.
- Provide custodial services, as needed, at the conclusion of the clinic.

### **Option 2 – School-run vaccination clinic**

The Health Department will:

- Provide schools with technical assistance for planning vaccination strategies in the school setting.
- Provide all clinic supplies and letters to parents, screening and consent forms (originals).

The school will:

- Make copies of all original letters and forms.
- Send letters and consent forms to parents and collect and verify returned forms.
- The school nurse will administer vaccinations to students under the medical orders of the commissioner of health.
- Be responsible for handling, storage, documentation requirements and accountability of the vaccine, utilizing guidance provided by the Health Department.

### **Option 3 - No vaccine**

The Health Department prefers that vaccine be offered to all students in the school setting. However, if your school is not able to do so, there are alternatives:

- Transport your students to another school-based clinic in your community - or -
- Provide information to your students and parents about locations in the community other than schools where vaccine will be available.



### Contact Information for Schools

#### Interested in Administering Novel H1N1 Influenza Vaccine

Details of the Vermont Department of Health's vaccination efforts in schools are still being decided. More information will be shared with you and your school as it becomes available.

Name of School: \_\_\_\_\_

Name of Supervisory Union: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

#1 contact: \_\_\_\_\_  
Last name First name Title

E-mail address: \_\_\_\_\_

#2 contact: \_\_\_\_\_  
Last name First name Title

E-mail address: \_\_\_\_\_

Total Student enrollment: \_\_\_\_\_

Grade Levels within the School: ☐ PreK-6 ☐ PreK-8 ☐ K-6 ☐ K-8  
☐ K-12 ☐ 7-12 ☐ 9-12 ☐ Other: \_\_\_\_\_

Type of School: ☐ Private ☐ Public

Please select one preferred option for providing vaccine to students in your school.

**For schools with 300 or more students:**

- ☐ VDH organized and run clinic.
- ☐ Vaccine supplied to the school and school establishes plan to vaccinate students, with support from VDH.
- ☐ Not interested in providing vaccine in the school.

**For schools with less than 300 students:**

- ☐ Vaccine supplied to the school and school establishes plan to vaccinate students, with support from VDH.
- ☐ Not interested in providing vaccine in the school.

**IMPORTANT!** Fax completed form to VDH Immunization Program at (802) 863-7395 by  
September 18, 2009